Blood Pressure Action Pack · Part 3 of 5

How to Measure Your Blood Pressure Properly

A step-by-step checklist for home readings. Tick each step as you go.

Before you start, read the Red-Flag and Pregnancy Blood Pressure Card. It is free at theeducatinggp.com/bp.

Your monitor and cuff

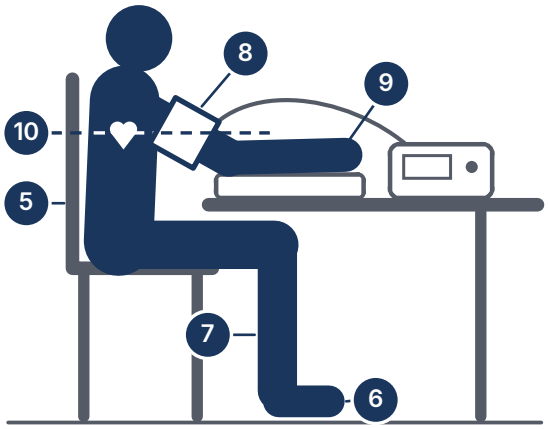
- ☐ (1) Use an upper-arm monitor that has been validated (checked for accuracy). [1, 2]
- ☐ (2) Use a cuff that fits your upper arm. Many cuffs are marked with the arm sizes they fit. [1, 3]

For 30 minutes before

- ☐ (3) No caffeine (such as coffee, tea or cola), no smoking or other nicotine, and no exercise. [1]
- ☐ (4) Empty your bladder (go for a wee). [1]

Get into position

- ☐ (5) Sit on a chair, with your back supported. [1]
- ☐ (6) Put your feet on the floor. [1]
- ☐ (7) Do not cross your legs. [1]
- ☐ (8) Put the cuff on your bare upper arm (a light sleeve is acceptable). [1]
- ☐ (9) Rest your arm on a table, supported. [3, 5]
- ☐ (10) Keep the middle of the cuff level with your heart. A cushion or book under your arm can help. [1]
- ☐ (11) Before your first reading, sit quietly and rest, ideally for at least 5 minutes. [1, 3]



The numbers match the steps.

Take the readings

- ☐ (12) Relax. Do not talk, read or use electronic devices while you rest or during the reading. [1]
- ☐ (13) Take 2 readings, at least 1 minute apart, and write both down. [4, 5]
- ☐ (14) Do this in the morning and in the evening, as often as your GP or nurse advised. [4, 5]

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UK health education only. Not personal medical advice, diagnosis, or treatment. In a life-threatening emergency call 999 or go to A&E. If you need medical help urgently, or are not sure where to go, use NHS 111 online or call 111. For other concerns contact your GP.
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The full safety advice

Call 999 straight away if you or someone else has sudden chest pain or tightness that does not go away, severe difficulty breathing, signs of a stroke such as face drooping, arm weakness or slurred speech, sudden blurred vision or loss of sight, a sudden severe headache, or new confusion. This applies whatever the blood pressure reading.

NICE counts blood pressure as severe when, measured in clinic, the top number is 180 or higher or the bottom number is 120 or higher. Either number on its own is enough. If either number in a home reading is at that level or higher and you feel well, rest for a few minutes and check it again. If either number is still that high, contact your GP surgery as soon as possible so it can be checked. If you're worried, or can't reach your surgery, get help from NHS 111.

If you often get headaches or blurred vision, or chest pain that comes and goes, get help from NHS 111.

If you're pregnant or have given birth in the last few weeks, different numbers apply. During pregnancy and in the weeks after birth, a top number of 140 or higher, or a bottom number of 90 or higher, is high. A top number of 160 or higher, or a bottom number of 110 or higher, is severe. If you're more than 20 weeks pregnant and either number reaches the high level for the first time in this pregnancy, contact your maternity unit so you can be checked within 24 hours, even if you feel well. If you're less than 20 weeks pregnant, or you had high blood pressure before this pregnancy, tell your midwife about a high reading, because you may need to see a specialist. If you've given birth in the last few weeks and either number reaches the high level, tell your midwife, health visitor or GP so it can be checked. If either number reaches the severe level, get urgent medical help the same day, even if you feel well. Also get urgent medical help if you have symptoms such as a severe headache that does not go away with painkillers, blurred vision or flashing lights, pain below the ribs, sudden swelling of the face, hands or feet, or feeling very unwell. If you're pregnant, call your maternity unit straight away. If you've recently given birth or can't reach your maternity unit, call 111.

Do not start, stop or change blood pressure medicine unless a doctor tells you to. If you take blood pressure medicine and find out you're pregnant, tell your doctor straight away.

This safety advice in large print: free at theeducatinggp.com/bp.

The safety advice above is approved wording, printed unchanged. Evidence: NICE NG136 (Terms used and 1.5.1; last updated 26 February 2026); NICE NG201 (1.2.26 and 1.2.27; published 19 August 2021); NICE NG133 (Terms used; last updated 17 April 2023); NHS.uk pages on high blood pressure (reviewed 19 July 2024), stroke symptoms (reviewed 12 September 2024), heart attack (reviewed 31 March 2026), chest pain (reviewed 8 August 2023), shortness of breath (reviewed 30 January 2024), confusion (reviewed 28 May 2024), subarachnoid haemorrhage (reviewed 4 September 2025), pre-eclampsia (reviewed 23 March 2026), high blood pressure in pregnancy (reviewed 13 November 2024) and amlodipine (reviewed 9 June 2026).

Sources (checked 10 November 2026)

[1] WHO technical specifications for automated non-invasive blood pressure measuring devices with cuff (World Health Organization, 2020; ISBN 978-92-4-000265-4), section 5, Measuring BP, page 25. https://www.who.int/publications/i/item/9789240002654

[2] NICE NG136, Hypertension in adults: diagnosis and management (last updated 26 February 2026), recommendation 1.1.3. https://www.nice.org.uk/guidance/ng136/chapter/recommendations

[3] NICE NG136, Hypertension in adults: diagnosis and management (last updated 26 February 2026), recommendation 1.1.4. https://www.nice.org.uk/guidance/ng136/chapter/recommendations

[4] NICE NG136, Hypertension in adults: diagnosis and management (last updated 26 February 2026), recommendation 1.2.7. https://www.nice.org.uk/guidance/ng136/chapter/recommendations

[5] NHS.uk, Blood pressure test (page last reviewed 25 November 2025). https://www.nhs.uk/tests-and-treatments/blood-pressure-test/

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